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## BIB DATA SHEET

CONFIRMATION NO. 9780

| SERIAL NUMBER | FILING or 371(c)<br>DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET<br>NO. |
|---------------|--------------------------|-------|----------------|------------------------|
| 10/554,917    | 04/27/2007               | 435   | 1652           | 039386-2277            |
|               | RULE                     |       |                |                        |

**APPLICANTS**

Vicki S. Elliott, San Jose, CA;  
 Reena Khare, Saratoga, CA;  
 Thomas W. Richardson, Belmont, CA;  
 Joseph P. Marquis, Rensselaer, NY;  
 Anita Swarnakar, San Francisco, CA;  
 April J.A. Hafalia, Dale City, CA;  
 Shanya D. Becha, San Francisco, CA;  
 Narinder K. Chawla-Walia, Union City, CA;  
 Mariah R. Baughn, Los Angeles, CA;  
 Soo Yeun Lee, Irvine, CA;  
 Uyen K. Tran, San Jose, CA;  
 Henry Yue, Sunnyvale, CA;  
 Danniell B. Nguyen, San Jose, CA;  
 Michael B. Thornton, Oakland, CA;  
 Rajagopal Gururajan, San Jose, CA;  
 Ameena R. Gandhi, Pacifica, CA;  
 Yan Lu, Mountain View, CA;  
 Monique G. Yao, Mountain View, CA;  
 Joana X. Li, Millbrae, CA;  
 Wen Luo, San Diego, CA;  
 Ernestine A. Lee, Kensington, CA;  
 Ian J. Forsythe, Edmonton, CANADA;  
 Craig H. Ison, San Jose, CA;  
 Amy D. Wilson, Encino, CA;  
 Pei Jin, Palo Alto, CA;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/US04/09215 03/24/2004  
 which claims benefit of 60/467,491 04/30/2003  
 and claims benefit of 60/469,441 05/09/2003  
 and claims benefit of 60/476,408 06/05/2003  
 and claims benefit of 60/494,656 08/12/2003  
 and claims benefit of 60/524,415 11/20/2003  
 and claims benefit of 60/528,750 12/10/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
 07/11/2007

|                                |   |  |                         |                        |                     |                           |
|--------------------------------|---|--|-------------------------|------------------------|---------------------|---------------------------|
| Foreign Priority claimed       | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | <b>STATE OR COUNTRY</b> | <b>SHEETS DRAWINGS</b> | <b>TOTAL CLAIMS</b> | <b>INDEPENDENT CLAIMS</b> |
| 35 USC 119(a-d) conditions met | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | SLS Initials                                 | CA                      | 0                      | 39                  | 2                         |
| Verified and Acknowledged      | /SHERIDAN SWOPE/<br>Examiner's Signature                            |  |                         |                        |                     |                           |

**ADDRESS**

FOLEY AND LARDNER LLP  
 SUITE 500  
 3000 K STREET NW  
 WASHINGTON, DC 20007  
 UNITED STATES

**TITLE**

Kinases and Phosphatases

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|--|---|---|
| <b>FILING FEE<br/>RECEIVED</b><br>2680 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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